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MEDICAL MATTERS

LEADING ARTICLES:

Position and Scope of the Mission Hospital
Z. Bercovitz, M. D., Ph. D.

The Mission Hospital & Growing Competition
R. Grierson, M. D.

Tuberculosis in Korea Today & Tomorrow
L. C. Brand, M. D.

Public Health Instruction in Schools
Miss C. B. Esteb, R. N.

The Student Volunteer Convention, Detroit
D. A. Macdonald

MAY, 1928

SEOUL, KOREA.

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TUBERCULOSIS ISOLATION WARD, KUNSAN HOSPITAL

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THE SUNDAY SCHOOL BUS
AND EXTENSION S. S. TEACHERS AT KWANGJU

(See page 107)

THE KOREA MISSION FIELD

A Monthly Journal of Christian Progress

Issued by the Federal Council of Evangelical Missions in Korea

VOL. XXIV

MAY, 1928

No. 5

The Position and Scope of the Mission Hospital in Korea Today

Z. BERCOVITZ, M. D., Ph. D.

THE POSITION of the mission hospital in Korea today is that of leader in all things medical, scientific, evangelistic, and in all efforts at public health and hygiene. The scope of the mission hospital is first, to reach the Gospel of Jesus Christ to the Koreans; second, to cooperate with and help the young Korean doctors who are opening private hospitals; third, to spread information about health and hygiene to all possible people; fourth, to do the best possible medical and surgical practice.

Cooperation with the Korean doctors is one of the great tasks of the medical missionary today. The foreign missionary doctor is still looked up to and respected, but he is not alone, as in years gone by, for there are others who have had training and who are more or less equipped for medical work. But he is looked up to on the assumption that he holds the key which will unlock the doors to the solution of many difficult problems. In most cases, his experience being so much broader than the Korean colleagues with whom he works, this is a perfectly natural anticipation. How successful the missionary will be is in large part dependent upon his being able to win the confidence of his Korean colleagues, and this, for the most part depends upon his attitude toward them. The amount of good

the missionary will do may be limited to the few with whom he comes in personal contact, or it may be unlimited according to his attitude toward the Korean doctors.

For example, in a village about 40 miles from Andong there was a severe outbreak of food-poisoning among a group of about 200 who had partaken of a Korean wedding feast. Four Korean doctors were there, and, after the trouble had gone on for the most part of a day and some 20 had died, the foreign physician was called. He took his Korean associate and male nurses from the mission hospital and went out to that place. As rapidly as possible the foreign physician set to work trying to determine the causes involved and also the symptomatic indications for treatment. It was discovered that his Korean colleagues who were in that place were treating the symptoms in just the opposite manner to what the experience of Western medical science indicated. As rapidly, and in as kind a manner as possible, the Korean friends were given what information could be given and they were told how to treat the symptoms as they arose. The result was gratifying, in the fact that the tide of death was turned and the village was saved a more extensive death toll, and also in the friendly attitude of the Korean doctors. As a result more were helped

than could possibly have been helped by the foreign physician going from house to house himself.

The foreign missionary physician finds one of his greatest opportunities is to be friendly to the young Korean doctors who are attempting to start private hospitals. The position is difficult and calls for the greatest demonstration of Christian grace, brotherhood and willingness to help. The foreign physicians should be here in the position of practical teachers to the young men around them,—consultants ready and willing at all times to consult with the Korean colleagues. In short the foreign physician is in one, leader, teacher, friend and all "for Christ's sake." The foreign physician came to Korea for the Koreans and not for himself.

There are a large number of Korean doctors going out into the country and opening private hospitals. In some cases these private hospitals are in competition with the mission hospitals and have been the cause for cutting down their incomes. The result of this has been hardship on the mission hospital. It is evident that many Koreans prefer the native doctors to treat them. There are, however, many cases in which the Korean doctor cannot handle them alone.

The main problem of the medical missionary is not that of running competition with these Korean doctors, but of cooperating with them in handling their difficult problems. In order to do this, he must first of all be gentle and kind and do everything in his power to help his Korean associates. The Korean doctor should be treated as a colleague and given all the professional courtesies of a physician at home. It will take time and patience to teach these young men the value of consultation with the foreign physicians. They should be taught the fundamental reasons for consultation. Following the consultation, if the case is one which should be admitted to a hospital and which requires an operation, the Korean physician should be invited to bring his case to our hospital and operate there

together with the foreign physician in charge of the hospital. The Korean brother should at all times be given to understand that the patient is his patient and the foreigner is only helping. The patient may be admitted to the hospital and the Korean doctor invited to come each day and see his patient with the foreign physician in charge of the hospital. Regarding the matter of fees, if this plan is worked the mission hospital should charge a nominal fee for the use of the operating and admission rooms. The Korean doctor can then continue to treat his patient and will collect his fees directly from him.

In this way the mission hospital gains by having the admission case and the Korean doctor gains by having the use of hospital facilities for his patient, and in addition the constant consultation of the foreign physician. The mission hospital is protected by the foreign physician constantly consulting with the Korean doctor and by operating with him.

This plan, of course, will not work the first day it is started, but with time it should be possible to develop a definite relationship with the Korean doctors which will be mutually beneficial. It will save them needing all the large equipment of a hospital, and yet provide them with facilities for doing better work. It will give the mission hospitals an added good relationship with the Korean professional men so that we can continue to help them and lead them to do better things.

To carry out our purpose to its fullest extent it is required of the foreign physician that they give of the very best that they have. This includes their best in the way of reading and educational advantages which the Korean do not have. It requires that they give of their best physically. The foreign medical missionary has a peculiar opportunity for service not afforded the average preacher. He has a place down among the sick, suffering and dying; he gets his reward after a hard trip over the hills at night to a dirty little hut where lies a woman in the pangs of labor on a mud floor and after a few hours

THE POSITION AND SCOPE OF THE MISSION HOSPITAL

of hard work he finally brings a boy into the world. The family is poor and cannot pay him a large fee for his services, but the woman is relieved, her life and that of the baby is saved and as he bids farewell to the little village he gets his reward in the still small voice which tells him, "inasmuch as ye have done it unto the least of these my children ye have done it unto me." It is all done "for Christ's sake" and over the Eastern hills the rising sun greets him happy, though of course a little tired and possibly hungry, but he has given of himself that men might live.

Health Education. There should be a definite educational program for each mission hospital. They should be centers for the dissemination of information on hygiene and other information which will uplift the Korean people.

The educational program should cooperate with other agencies which are at work in the country. For example, in every mission station where there is a Bible Institute and a foreign physician, the physician should assume the responsibility of carrying on a definite systematic course on hygiene. This course should be continued year after year and should be fully organized. It should be given to all students, both men and women, who come into the station for Bible training classes. For a matter of text-book material there are available many well written leaflets which contain many facts and much information. These leaflets can be purchased for a very small sum from the Christian Literature Society, and they should be the basis for teaching. Those who come in for Bible training classes should be shown these leaflets and encouraged to take many of them back home to their villages and teach their friends and neighbors what they have learned. Most of those who come in for these classes are either evangelists or pastors or Bible-women, and are in positions of leadership and are holding country classes. If this were systematically carried out in each mission station it would not be long before we

would have information about flies, fleas, mosquitoes, leprosy, tuberculosis, care and feeding of children, pregnancy, etc., etc. widely disseminated.

This is one of the greatest opportunities of doing good which has ever presented itself to the medical missionary, and with the complete system of Bible institutes and classes for workers which are held throughout the country, it is a failure to do his duty on the part of the medical missionary if he withholds this information from the people who are dying for lack of it. Korean customs which have been in vogue for centuries will not be changed in a moment, but the start must be made; and it is the duty of the medical missionary to bring these people out of the darkness of sin and suffering into the light of a new day of health and happiness.

Evangelism. All of this is perfectly satisfactory and valuable in itself, but in the last analysis the main object of all our work is not so much humanitarian as it is evangelistic. Our evangelistic program, the work done to spread the Gospel of Jesus Christ, and the winning of souls for Christ, is the crowning achievement of the medical missionary and the only real reason for his presence here in Korea today.

We may mention medical education, but medical education without Christ in the foreground is rank waste of money and a betrayal of all the highest aims of the medical missionary. Anatomy, physiology, pathology, and the courses of medical instruction are the same in the government medical schools and in the missionary schools—the difference is Christ, and the men who are turned out of the missionary schools should be the highest and best that can be produced in the Christian life of the community. They should have ideals before them higher than a one yen bill. They should be thoroughly evangelistic in their attitude, and aims, and all their lives should be governed by the life of the Great Physician.

Evangelism should hold the foremost place in the hospital regime. The hospital evange-

ists should be the most active members of the staff—they should make rounds in the hospital twice a day and visit all patients in the wards regularly. They have their place in the dispensaries. In addition to this they have their place in the follow-up work, especially of those who decide to believe while in the hospital. It is the duty of the evangelistic staff to record the name and address of each patient who has decided to believe. When that patient leaves the hospital, within a week following his departure the evangelist should send him a letter encouraging him to live up to the belief he has professed while

in the hospital, and encouraging him to tell about it to his friends. In addition to that letter, another should be sent to the nearest established church informing the elder or pastor of the fact that there is a new believer near by. That church should be encouraged to find this new believer and either to bring him into the church or to send a delegation from the church to that man's village on Sunday and preach there. Finally there will develop a group around the new believer and the near-by church will be stronger for having taken up active evangelistic work itself.

A Mother's Faith

MARIAN B. HALL, M. D.

THE FIRST, LONG, slanting beams of the morning sunlight were revealing the thatched roofs and mud walls of her neighbours' houses, as Mrs. Yi stepped out into the chilly morning air of an April day. She was starting on a long journey, but she carried with her only an irregular bundle strapped upon her back in the manner in which the Korean children are carried. All about her were the signs and promises of spring, the exultant songs of birds, the swelling buds of bush and tree; but there was no exultation in this mother's heart. Through three terrible weeks she had nursed her little, only son through a fever, but in spite of all her loving care she knew that he was daily growing worse. All the neighbours told her he would die, that she could not save him now. Even her husband gave her no encouragement. He believed his only son as good as dead and mourned that he had no descendant to pay respects at his grave. Only in the mother's heart was there hope, the undying hope which springs from the deep devotion of mother-love; and that was why she was starting out at this early hour, carrying upon her back the strangely quiet burden from which

only now and then came a sound, a moan or pain.

Mrs. Yi had heard that 60 miles to the north, in the capital city of the province, was a hospital where the Jesus believing people cured all kinds of sicknesses even after the sorceresses had hopelessly failed. If only she could get there with her precious burden still alive then her baby would be saved. Her husband told her it was folly, but she insisted and he gave her five yen, all the money he had, to take upon her journey. This five yen Mrs. Yi tucked safely away in her "bag." It would be needed to pay the doctor, she thought, and so she begged her meals along the way.

All day the mother walked, but when night came she had not gone half the distance. No time to stop. She must press on while life still remained in the apathetic burden on her back. Of course it was not safe to travel at night, and she was not familiar with the road; but she made careful enquiries and all went well until, far into the night, she met two men of evil purpose who laid hands upon her. Frantic with fear for her child the woman besought them not to molest her, she

told them her pitiful story, showed them her suffering baby and begged them to let her go. Some remnant of decency remained in these men and at length they let the woman go, but in her fear and anxiety the poor mother took the wrong turn in the road and by morning found she had gone many miles out of her way. Again she enquired the way but when she reached the hospital at last, Mrs. Yi had travelled 100 miles and her feet were all blistered and sore.

Anxiously the mother watched the doctor's face as the examination was made. There was indeed little but "skin and bones" left, and it seemed doubtful if he had strength enough left to recover even with proper care. Immediate operation was necessary if the child was to be given a chance of life at all. The mother agreed and eagerly proffered her five yen in payment. The money was refused for it was known to include her last sen. Still the mother urged the doctor to accept the money and was quite agitated because he refused. It finally came out that, knowing only the ways of the sorceress and untrained native doctors, the woman feared that if she paid no money her child would not receive good care. The operation was performed, and, though for some days his life hung in the balance, the special feeding and good nursing he received, along with the doctor's treatment, began to have effect, and little by little the old-looking skin wrinkled over his bones began to fill out as he gained in weight and strength. As the month of June neared its close it was hard to recognize the plump;

happy baby playing about, the pet of the hospital, as the emaciated child which had entered almost three months earlier. During this time the mother too had made herself a part of the hospital. So great was her gratitude that she begged the doctor to give her some work that she might do something to repay the hospital for all she had received. She was given a job in the laundry, and it was soon remarked that the laundry came back cleaner and nicer than ever before. Here was a labour of love and gratitude for the life of the son who had been restored to her. Not content with this she cut off a heavy braid of her hair and gave it to the nurse.

Daily Mrs. Yi talked with the Bible-woman Taihe and learned of Christ and of what His coming means to humanity. Gladly she followed Him, for she felt that to Him she owed her child's life. As Taihe went about amongst the other patients preaching, Mrs. Yi found time to go along and testify as to the wonderful thing the Lord had done for her.

July came. The father, who up till now had been obliged to stay on his little farm and care for his crops, came in search of his wife. He felt sure the baby was dead and that the wife was ashamed to return home without her son. When his child was shown to him happy and well he could scarcely believe the good news. Great was his joy as he returned home, taking with him his wife and precious son, the latter restored to him through a mother's love and devotion and the work of God's servants who labored for him in a Christian hospital.



The Mission Hospital and Growing Competition

ROBERT GRIERSON, M. D.

SINCE YOU, Mr. Editor, requested me to arrange a Symposium on the above subject, I have asked some doctors in charge of hospitals for aid in its preparation, and now present the results.

I had no idea that it was a delicate or dangerous subject. I only wish that I had known when I received your request that there was a perfectly good reason for escaping the commission. Two of the thirteen doctors who answered my enquiries were afraid that it would not be wise to commit themselves on this subject. One of them said:—" . . . In my opinion you are proposing to tread on dangerous ground by advertising to the missionary world certain facts concerning our medical work which may easily be misunderstood by the lay-readers of *The KOREA MISSION FIELD*. I should think the subjects introduced should at least be well considered in a conference of the medical fraternity before being sent out to the lay world."

You see, then, that I am in a dilemma. If I go on with this Symposium, it is in the face of a warning from a very influential member of our fraternity. But if I throw up the commission it will embarrass you to fill up your columns in the May number. I guess that my promise to provide you copy must decide my procedure, much as I would like to please my colleague and have a good excuse to escape from typing this thing off.

I asked my Colleagues—

Who are your Competitors?

The replies were:—"One Government hospital with six doctors: three small Korean hospitals." "Japanese Government hospital, Korean and Chinese graduates, and quacks." "Korean private practitioners." "City hospital, and private hospitals." "Korean medical practitioners with Severance and Government diplomas." "A number of Korean graduate

doctors, and a municipal hospital." "Government school graduates, Severance graduates, and old style Korean doctors." "Government and private hospitals."

These answers pretty well cover the field. In my own case, the competitors are a large Government hospital, a municipal hospital, a Korean doctor whom I myself educated, all the old-style Korean doctors, and medicine vendors.

The next question was—

Do they Play Fair?

Answers:—"Some of each, fair and un-fair." "I believe they play fair." "Generally, but not always." "Yes." "Unfairness not scrupled at if it leads to personal advantage." "Fair." "Fair." "Fair." "As a rule, they play fair." The majority represent our competitors as observing medical etiquette toward us. The only strongly adverse opinion among those above comes from a locality where there is no Government or Municipal hospital, and where the Mission doctor has had doctors educated by himself turn away in bitter rivalry.

Are you getting an Appropriate Share of the total patronage in your district?

To this it is replied:—"Yes." "I believe we are, considering our equipment and force, and we get our share of the receipts." "Yes." "Formerly so: latterly it is dropping off." "No." "Yes." "Yes." "Yes." "The greater share comes to the Mission hospital." "I think so". The experience of the majority, then, is that our hospitals are at the present time holding their ground. We have no desire to prevent other people from healing the sick. Jesus reproved his disciples who wished to prevent others from healing in his name. He would probably have done likewise, even if the others had not been healing in his name. The competition is not doing us any harm if

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as it appears, the Mission hospital is getting its appropriate share of the total practice in each community.

Does the Competition Affect most the in-patient or the out-patient Clinics?

Answers:—"Out-patients most: due to distance from the city." "Out-patients: and Severance and Pyengyang are drawing in-patients away from us more and more." "Both." "Out-patients." "Out-patients." "About alike." "Out-patients." "Affect both equally." It seems to be the dispensary clinic that suffers most from the increase of medical facilities in the community. Personally I welcome this development. In olden days the multitude of daily dispensary cases kept the doctor at his desk attending to trivial cases, while the serious cases in ward were inadequately studied for want of time.

Are your prices higher or lower than Competitors'?

Answers:—"Lower." "I believe they are higher." "Much the same." "Lower." "About the same." "Approximately quite similar." "About same." "About the same, or lower." Evidently, then, competition does not take the line of price cutting, on either side, and this is as it should be.

In what respect do you think a Mission Hospital gives better service than its Competitors?

"Cares for poor, and for very difficult cases." "More conscientious consideration of patients, and their real needs: more moral and spiritual uplift to the patients." "Should excel in care of cases in the wards, of operative cases, of maternity cases, especially of those with whom we will have contact for some time, as here lies our best field of missionary evangelism." "More sympathetic, more thorough treatment, more careful diagnosis." "Surgery." "In latest diagnosis and treatment." "In equipment, and professional skill." "Honest diagnosis and prognosis set example in charity: aim to heal the whole body and mind." "It

gives Christian service, with special consideration to the poor." "Should excel in several departments, as Surgery, Eye-Ear-Nose-Throat, Gynecology, Obstetrics, X-Ray."

It must count for much that we enlist, not only the latest and best methods, drawn from our access to the whole world's medical knowledge, but also from our access to the Divine Compassion and Assistance in answer to constant fervent prayer. My own hospital is prospering greatly at present, due to the special prayer of a circle of praying friends in Canada and America.

Do you deplore or welcome the Competition?

"Welcome it." "I welcome them, and wish to foster the work of all who have the good of the patient at heart." "Neither: ignore it." "Welcome." "Welcomed, because above ancient standards: and deplored because still below our standards." "Welcomed." "Passively accept it." "We welcome competition." "Welcome most of them." "Welcomed." The prevailing tone of the above answers is friendly to the competitors, and so reflects the mind of Christ. We would probably not do so well, or be up on our toes professionally, if we had everything to ourselves. We would probably grow in conceit, and get careless in our work.

Do you have opportunities of friendly fellowship with Competitors?

"Some." "Yes, with both Japanese and Koreans." "We visit back and forth between hospitals with the Japanese annually." "Only occasionally." "No! cannot associate, because the Korean doctors here drink, and deal with dancing girls." "With some of the Koreans." "Occasionally." "Moderate opportunity for fellowship with Government and Severance graduates."

There are, of course, barriers of language and race and barriers of individual incompatibility; yet, already, there is a greater tendency to friendliness than to antagonism, and the fellowship is bound to increase as the years go by.

Do Korean Practitioners send you cases for treatment which they are not equipped to care for?

"Some." "Yes, and I believe always in preference to other hospitals." "Not directly, but they do indirectly." "Only once in a great while." "Only cases undesirable to them: they send many to Seoul rather than to us." "A good many surgical cases." "Have done so a number of times." "Seldom." "Some do." "Yes." On the whole, then, it would appear that private Korean doctors already are, to a certain degree, feeders of our hospitals. As practitioners increase it must surely be that they will be, as in America, the intermediaries between the desperate surgical cases and the hospitals; for, the private practitioner steers clear of cases in which the prognosis is very bad, because deaths in the practice are a bad advertisement.

Are the people in your district learning that the old time Korean doctor is inadequate?

"Yes." "Yes, they are, slowly, and, in some cases remarkably rapidly." "Yes." "Slowly." "Yes, I think so, in increasing measure." "Yes." "Yes." "Very slowly: the un-educated country people tend to use all the medicine they can get, old style and new style." "Yes." "Yes."

As the influence of the old-time doctors lessens, the number of patients seeking scientific treatment must increase, and Mission hospitals are certain to have a good share of this increase.

Is your reaction to the Competition on the side of hope, or of despair?

"Hope." "Certainly on the side of hope: I realize that the patients need more aid than we alone can give." "So long as we do good work, there will be plenty to do." "Despair as far as my work is concerned, because of financial difficulties involved." "Hope." "Hope." "Competition is indicative of advancement, therefore the reaction is one of hope." "Hope." "For the future of our hospital here, despair: for the ultimate accomplishment

of our purpose, hope." "Competition to some extent is unavoidable: our future depends on specializing in a few branches."

There is not much pessimism among these answers, is there? The two less cheerful answers come from localities with problems of special difficulty, and we can hope for better days there too; for the general causes for hope must eventually operate there, as well as elsewhere.

What special policies should we pursue in order to maintain successful operation?

"Work together." "Develop more skill in some one branch than others can equal." "Excell at certain things, and be as proficient as possible at others: never dissemble." "Must endow a basic number of charity beds, (there is no competition along that line) and these will also draw paying patients." "Specialize." "Make our service such that it will be sought." "A high order of medical service, without interruptions: health education through schools, Bible institutes, etc.: secure co-operation of Korean practitioners by friendly relationships, and avoidance of directly competitive activities." "None to maintain ourselves: ours is to decrease, theirs to increase: our purpose should be to establish hospitals under Korean leadership, and as they become sufficient, gradually retire." "Develop some specialty, and give superior service." "Choose one or more specialties, and equip well, and get subsidy enough to ensure charity work."

To which I would only add that our hospitals should be marked above others for love, kindness, gentleness, good cheer, merry laughter, close personal attention by doctors and nurses, and not too strict rules. Above all specialize in Love.

Does the Korean church constituency loyally patronize your clinic?

"Fairly so; Christians want free service, and this is a great problem." "It first patronizes its own members who are physicians, and us in case they fail: our village church is entirely for us." "Yes! at least noticeably more

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than any other constituency: we cannot expect absolutism." "No!" "Yes!" "No! they go to Korean M. D.'s." "Fairly well." "The church supports the clinic, but I would say, none too loyally." "No! giving as excuse that fellow church members may gossip about their diseases." "No! they do not come because of Church affiliation: they come for the treatment or doctor concerned." It looks as if the hospitals are regarded as foreign institutions, not part of the ordinary church machinery, and it is natural for them to patronize their own nationals. Nevertheless, something should be done, even before "Devolution" comes, to interest the Korean Church more in this form of Divine Healing.

What direct aid in finance should we expect from the Korean Church?

"Much." "They might support the hospital evangelists, and their charity cases." "As a Church, none: as Christian individuals, help for a worthy charity." "Hopeless to expect any: can't even finance schools properly." "None as yet." "Not much except as patients." "Have received none." "We should expect the Korean Church to take our hospitals, and run them: the Mission may give grants to help them for a period." "All Church members should be expected to pay their hospital bills, at least." "Endowment: but this will probably not come as long as Mission carries responsibility; Zaidan might bring it."

Would devolution increase our power to stem the tide of competition?

"We must look to devolution." "More friendly and helpful consideration of Korean Christian doctors is the best policy, I believe." "It would both help and hinder, in certain ways: until the professional conscience and bent for aseptic work is well established, it would lower our efficiency toward the level of our competitors." "Not much in maintaining: the Church would probably decrease the extension of it." "No! not here, I think." "Might help if not radically applied." "Devo-

lution, to my mind, is simply the assuming of medical responsibility by the Korean people: naturally, as soon as it is complete, the missionaries' work is finished." "Devolution now would be premature, and would reduce the constituency." "Yes! if endowment is sufficient to give charity."

Have you any other suggestions on the subject?

"My opinion is that we doctors should try, as fast as possible, to select native doctors to take the bulk of the medical work, and we men stay in the background as much as possible. The Korean can attract far more patients than we medical men can, if he has the desire and spirit to do so. Also, I feel that we should begin to turn over to the Korean Church the responsibility of the hospitals. My staff is running this plant almost altogether, and doing it well. I simply stay in the background. It is not an easy matter to get a good man to take hold, and run things, however. Jealousy is the greatest problem the Koreans have to overcome in carrying on such a work."

"I think that our mission is a self-limiting one; and when we see Korean physicians getting more and more able to take over a large share of the work, we may look upon that as progress. I believe that we are to look forward to a decided decrease in the foreign staffing of our hospitals."

"I do not know of a more effective way to present Christ to those who do not know Him than through the treatment in our Mission hospitals. I believe that they should be continued as an evangelistic agency, at least as we can draw as many patients to us, per doctor, as the Japanese can: and that will be for a long time, if we continue in Christian Zeal, and do some one thing better than our competitors. I am glad for Christians to patronize their Christian doctors, and do not try to induce them to come to us."

"I think we must provide our communities with better medicine and surgery than is

obtained elsewhere. We must use every opportunity to raise the standard of public expectation, and take advantage of every chance to educate the public in preventive medicine."

"Our aim should be to turn our country medical work over to the Korean graduate doctor as soon as there are enough of them who are Christians to handle it. The larger centres should be maintained."

"Being denied support of a basic number of ten charity beds, with the falling off in pay patients, keeps me constantly in debt on the one hand, in spite of most rigid cuts and economies; and, on the other hand, forces me to turn away the poorer patients, who cannot pay for treatment. It is a situation that defeats the object of the medical mission."

"Our hospitals, where they have adequate support, should cater as much as possible to charity work, with an effort to specialize for

increase income."

"I did not mention above our evangelistic opportunity, which I consider the prime reason for our work."

"Encourage and develop Korean responsibility and leadership in the hospital, looking toward the time when they will have full responsibility and management."

This is the end of the Symposium. I thank the colleagues who assisted in its preparation. I suggest that you have the medical members of your Editorial Board eliminate any "dangerous thoughts" which might not be suitable to the minds of lay readers. As for myself, I think that the best days of our Christian medical institutions are yet to come, as our Korean brethren, and Korean colleagues and Korean funds participate in the service, with The Master Himself by our side.



Tuberculosis in Korea Today and Tomorrow

LOUIS C. BRAND, M. D.



WE MAY NOT KNOW just why the cross with its double horizontal bars is the adopted emblem of Tuberculosis, but I like to think of one of those bars as symbolizing human sympathy and the other brotherly compassion. Of what other physical frailty of man could this emblem be more appropriate or so individually and universally significant? Whoever you are, or of whatever age, class, race or country, you have seen the consuming hand of tuberculosis rest on friend or kin of those you know and love. We of the medical profession have seen many, so many, such cases whose personalities are so fine and visions of life so bright, but whose strength is being annihilated by this silent, and too often invisible foe. The most pleasant time in my preparation for mission-

ary service was spent in administering treatment to scores of such friends in an American sanatorium. These patients, when they grasp the nature of their malady and the restorative and protective plan of treatment, put up more whole-hearted and persistent fight for recovery and the protection of others than those suffering from any other class of chronic disease. I am thankful to realize that among the Koreans and Japanese whom we have treated there has been a demonstration of this same spirit.

My newness in missionary work prevents me from knowing all that has been done toward treating tuberculosis in Korea. The pioneer efforts of Dr. Fletcher, Dr. Bigger and others have been fruitful in that they have proved to some, at least, that tuberculosis can be a

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tested and controlled. They have also awakened much interest in the treatment and prevention of this disease. Lack of funds for this work and the limited means of the patients have necessitated an adaptation of their methods of treatment to available resources and the primary needs of the cases.

In addition to general treatment, Dr. Bigger obtained good results in several instances by having the patient cut a "neck" hole in the outer door, and rest and sleep with his head outside the room while his body was kept warm on the hot floor within. Dr. Wilson induced some to insert a piece of hollow tile pipe through the upper wall on opposite sides of the room, thus supplying ventilation. I wish that this luxury could be adopted in every close sealed sleeping-room. In Kunsan thirty-one cases of lung tuberculosis have been treated by inflating the pleura with sterile air, thus giving the diseased tissues most complete relaxation and rest. Seven of these patients showed definite improvement following treatment, including all four of those who took as many as seven treatments. Our most promising patient, who had marked involvement of one lung, has had eleven treatments and has assured us of her desire to co-operate in taking one treatment a month for the next two years; although she lives over thirty miles from the hospital, and now feels no ill effects of the disease. However, this treatment is of value in only selected cases, and is of real benefit to not more than ten per cent of the cases we diagnose. The ray of hope that this treatment supplies to those who have lung tuberculosis is of greatest value, in that it brings them to us for general advice concerning their treatment and the protection of others.

Dr. Fletcher has used his X-ray to good advantage in the diagnosis of early cases, and has been diligently seeking the best methods of treatment for patients under his care. He has just written a valuable pamphlet in Korean, which gives a comprehensive outline of the essentials in treating the disease and

safeguarding the health of others. I believe that this is the greatest contribution thus far made towards the control of tuberculosis in Korea; and that one of these booklets should be in the possession of, or its contents explained to, each Korean who has the disease, or who is definitely exposed to it.

But are we controlling the advance of tuberculosis in Korea? Government statistics indicate that it has increased twenty per cent in the past few years. Granted that this is due in part to more accurate diagnosis, we realize that only a comparatively small percentage of the cases throughout Korea know that they have the disease until they are facing the grave. Since many of these undiagnosed cases, being socially inclined, are quite ambulatory, and the facilities for communication are so rapidly increasing in Korea, the spread of tuberculosis, as now treated, is inevitable. The efforts of few or all the missionary doctors along with their general hospital work are inadequate to prevent its advance.

We are thankful to know that Dr. Sherwood Hall has received appropriations for, and is erecting in Haiju, the first Tuberculosis Sanatorium in Korea. He has worked out plans for building construction that are especially adapted to the needs and comfort of Korean patients. For years the fore-sighted missionaries of Korea have realized the need of such institutions to treat the White Plague, which is more contagious and of greater economical importance than Leprosy. But we all realize that tuberculosis must be diagnosed before it is so far advanced that the patients, feeling their own need, will seek hospital or sanatorium treatment. Much can be accomplished by taking a careful family and personal history of all school children and mission employees and making careful lung examinations of all suspicious cases.

The wisest move toward controlling and decreasing tuberculosis in Korea has been made by Dr. Oh and other Severance doctors and interested friends. They know that

neither the Severance medical students nor those of any other country or school can learn to diagnose tuberculosis in its early stage, from lectures and text-book study alone. And we realize that the only way the future doctors of Korea can attain efficiency in combating this disease is through the applied study of lung involvement in typical pulmonary tuberculosis cases. Since it is impossible for Severance to accommodate such patients in their city hospital, for didactic purposes, the logical idea of erecting a Tuberculosis Sanatorium near Seoul, primarily to fill this need, as well as to restore the health of the patients, has received their earnest consideration.

Dr. Oh has gone so far as to personally search the country around Seoul for a suitable location. He has found one which has been seen and highly commended by other doctors, who are also deeply interested in this long neglected channel of service. The location is eight miles south of Seoul, near the main road, and only two miles from the nearest railroad station. It is of good altitude, slopes in the right direction, and, as I understand, is available for purchase. We who are interested agree that the construction of a Sanatorium should be begun in moderation, but with vision for future expansion, and that the most practical plans of such institutions should be considered and so modified as to best serve local needs. From the first it should accommodate enough part-pay or charity patients for didactic purposes at least, and probably eighty per cent of the pay cases who wish to enter, in order that selection

may be made of those suitable for treatment. If medical students have this invaluable opportunity of studying tuberculosis (I speak from personal experience) they can go on into practice with the ability to diagnose this disease before it becomes contagious in sixty to ninety per cent of early cases. For the future good of Korea I wish that every medical student of Severance and the Government School could avail himself of this additional training. Thus in time enough doctors, competent in the diagnosis and treatment of tuberculosis, would be scattered throughout Korea to discover the disease in its earlier and least contagious stages.

We believe that the greatest step toward conquering tuberculosis will be accomplished when the patients in general know that they have the disease, and have been informed of the ways in which they can prevent its spread to others. I believe that the average patient can be made to feel his responsibility to protect the health of others more and more when his case is wisely handled by the doctor in whom his faith is justified. Even the barrier of poverty can be greatly thwarted by carefulness on the part of the individual. American authorities on tuberculosis state that the patient who knows the rules of safeguarding others, and is careful, absolutely prevents them from exposure to his infection. The ideal method by which the patient can gain the knowledge and *habit* of following the best treatment and protecting others from infection is by spending from three to six months in a Tuberculosis Sanatorium.



Tenth Quadrennial Convention of Student Volunteer Movement for Foreign Missions Detroit, December 28, 1927 to Jan. 1, 1928.

D. A. MACDONALD

LET ME GIVE impressions of the Convention from the point of view of the missionary. Naturally, I compared Detroit with Nashville, the only other one of the S. V. M. Conventions which I have attended. I was one of the Knox College undergraduates on the Canadian Special which sped through the night on its way to Nashville. We were both obvious and audible. We had great streamers on the train, "the evangelization of the world in this generation" and at stations en route we enlivened things with missionary hymns. Since then, I have travelled far. I have seen Christianity at work in other lands. I have met up with non-Christian religions. I have widened in knowledge and experience and I came to Detroit.

The Leaders. Who were the leaders? There are many new faces. The Chairmen are all new to me. At times I feel old and lonely, but Mott and Speer are still there, still sweep that great student assembly with the power of their tremendous personalities. One-quarter of a century ago these two men were the great leaders of student thought. Today they still retain their hold and their messages at Detroit, strong, confident, Christian statements, backed within over-whelming array of facts, marked high levels of the Convention. One cannot mention them all, but men whom I met for the first time and who made themselves felt on platform and in small groups and whom I can never forget were: Henry Hodgkin of China, Dr. Holland of India, and Dr. Richard Roberts of Toronto.

The National. One characteristic of the Convention was the prominent place it gave to nationals from other lands. Nothing was more impressive than this. At session

after session they came on the platform, men and women of other races, and from far distant lands, of different colours, some of them of halting speech. China, Japan, Korea, India, Africa, the Near East. In the old days the missionaries were the spokesmen for these lands; at Detroit they spoke for themselves and I, as a missionary, was glad to have it so. It seemed as though the whole world were appealing to the youth of America, uttering one great continuous cry for justice, love, a square deal, Christian brotherhood, calling upon us to live up to our profession. The effect of this grew from day to day and was to me the greatest thing accomplished. They brought to us not only striking information about their own lands, but a telling indictment of Western civilization. For the most part with beautiful courtesy and admirable restraint, but with deadly frankness they made us see ourselves as others see us.

What kind of missionaries are needed? Much time was given to this question. The nationals answered it from the big platform and the undergraduates worried over it at the colloquia. After it was all over, one felt that very little new had been said. The missionaries of tomorrow need pretty much the same qualifications as did the missionary of yesterday. Needless to say most of us are sadly lacking in these qualifications.

Change of emphasis. In both message and method the point of emphasis has shifted several times in the S. V. M. and quite properly so. The personal and the social gospel, the home base and the native churches, have each received special attention, though this emphasis has never been exclusive. One of the most thrilling moments at Nashville was when one of the dominating speakers from the

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big platform held his watch in his hand and relentlessly ticked off the periods for two long minutes, registering the passing out into a Christless eternity of so many unfortunate heathen. One could feel the sensitive student audience squirm and sweat under the urgency of this appeal. No such spell-binding was attempted at Detroit. I doubt if it would have been possible. There was emotion, plenty of it. 4,000 college boys and girls sitting session by session under one roof gave an opportunity for mass emotion which was wisely utilized, but not so openly exploited as in past conventions. The students of today think of the foreign missionary movement not so much as an aggressive crusade by the western churches to win individual converts as a co-operative enterprise in which Christians of all nations and races join together in sharing their best with each other and in trying to bring about the Kingdom of God. The new emphasis is, undoubtedly, on the social gospel and insists on foreign missions dealing seriously with war, industrial problems, racial questions, church unity. Personally, I welcome the new point of view and was delighted to find such a sane combination of these two sides of Jesus' gospel which so often have been thought of as mutually exclusive.

Colloquia. The pressure was relieved and opportunity given to recover emotional balance by dividing up the convention into more than thirty small groups, which met frequently under experienced leaders and with expert advisers on call. Here the lid was lifted and free exchange of opinion was secured, the students themselves doing most of the talking. Undergraduates, right from college halls, can't be expected to know much about the deep problems of foreign missions. Their information and experience are both inadequate, but they make up for it in frankness, sincerity and enthusiasm.

Maps and Flags. At the first session, when I took my seat in a huge auditorium and waited for the thrill, I was conscious of some-

thing missing. After a while, I realized what it was. The flags and maps were not there. All through the five days I didn't see one. Sunday evening I was drafted to preach in one of the small city churches and found a flag on the platform with me and I hardly knew whether to regard it as a friend or enemy. Before the convention was over I realized the absence of maps and flags was typical of the new spirit of the S. V. Nationalism of the extreme type so prevalent today is anathema. No one wanted to wave a flag. Perhaps this spirit is rather overdone.

Personally, I have long felt that the best and most effective internationalist and inter-racialist is the one who has a healthy love for and pride in his own nation and race. And what about no maps? Well, the new point of view rather ignores the old geographical divisions. An up-to-date missionary map of the world would show the great dark areas, the unoccupied mission fields, the pagan sections, not as Mongolia, Afghanistan, and Central Africa, but certain great cross-sections of humanity, great relationships of life, such as industrial life, commercial life, political life, international and inter-racial relationships. There are the great black areas of the world today, which call for the present generation for pioneers of this type of Carey, Morrison and Livingstone to penetrate their darkness with the gospel of Jesus Christ.

Korea. As a loyal missionary, I was greatly concerned when day after day passed and no mention was made of Korea from the big platform. Finally, on the last day of the Convention, at the morning session, in looking over the program I was relieved to see that Korea had a place between the Near East and Africa. However, as this was likely to be Korea's only appearance on the big platform I was naturally anxious. When (Mrs.) Kim In Tok stepped to the front of the platform at the call of the chairman and faced that great audience of nearly 5,000 people from all over America and from other parts of the world, one trembled for her. What can one lit-

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woman do in twenty short minutes to make herself known and plead her cause? In one of the most striking and effective addresses of the whole Convention she completely captivated that great audience by her beautiful Christian spirit, her broad sympathetic outlook and her charming personality, so well set off by her dainty Korean costume. I don't think I ever saw so much accomplished in so short a time. There were several Korean nationals in attendance at the Convention and about a dozen missionaries. I am sorry I cannot give the names but we had a get-to-

gether supper at a restaurant, a group photograph was taken, and on Thursday afternoon when the Convention broke up into Sectional Conferences Korea had one Section.

On the whole, as a missionary, I came away from Detroit encouraged and inspired. The great leaders of today are as devoted, resourceful and well-informed as their predecessors. The heart of the student body is sound and healthy and, while the point of view has changed and the emphasis shifted, the change is all to the good.

Station Brevities

Andong

A missionary has found that frequently Gospels may be sold by giving away with each one a little colored S. S. lesson card sent from America. Following a traveler into an inn he tried to sell him a Gospel, but the man would not buy. Then the missionary tried the innkeeper's wife, but the old lady said she could not read, so she would not buy. "Show it to your husband, then, and have him read it to you." "But, he can't read either" was her reply. "Have you any little children?" "Yes." Then he showed her a picture of Jacob asleep while the angels ascended and descended. This won her interest, and she bought at once. Many other sales have been made that could not have made but for the little colored cards.

Haiju

The district class was more encouraging than for some time past, with an attendance of 200. In spite of the illness of the special preacher invited to conduct the services, the interest was well maintained and the attendance very good. Prayer was answered in the healing and complete restoration of the preacher and he was able to take his full share of work before leaving.

A special collection was taken for the expenses of a preaching campaign all over the district. This amounted to over Yen 125.00 without any help from the foreigners.

Seoul

At the meeting of the Local Association of the Japanese Congregational churches at Seoul, March 10-12, the three visiting pastors from Pyengyang, Taiden and Taiku took the Sunday services most ac-

ceptably, one preaching in the morning and two in the evening services, to full houses. At the close of the evening service Prof. Alfred Bohner of Germany, who chanced to be in town, gave an appropriate recital on the piano, at which he is an expert. He is the son of German missionaries in South Africa, where he was born.

The Japanese church at Taikyu recently celebrated its twelfth anniversary. Dr. Newell preached the commemorative sermon, and received seven members into the church that day. Plans are afoot for rebuilding on a larger scale in the near future. The pastor is Mr. I. Niwa, son of Secretary Niwa of the Seoul Japanese Y. M. C. A.

Sungjin

Kindergarten work is one of the greatest opportunities to reach the hearts of parents who are always delighted to have their children sing and recite at the various programmes given by the churches. In many cases, these little ones have been the means of bringing their mothers and older sisters to the services.

Wonju

The present pastor, Pang Whoon, has led the Kangnung church from a state of indifference to one of great enthusiasm since his appointment there last June. There has been reported one victory after another but the last report is the best of all. A local Bible Institute for both men and women was held with an attendance of ninety. Evening preaching services and daybreak prayer meetings were well attended. The names of many new believers were received. The spirit of the whole community toward the church seems changed.

The Weak Things of The Earth

Chapter VII

"Whiter than Snow"

ELLASUE WAGNER

"WHO ARE YOU?" I asked the bright faced young chap with the eager eyes, who seemed to be one of the hosts at the Hall. He was helping here, yonder, wherever a helping hand was needed, getting a book for this one, a pencil for me, tending the fire, then the lights; evidently it was his self-imposed task to see that every one was comfortable

"My name is Sim Jai Min," he answered with a flashing smile.

"O, Sim Jai Min!" I gasped, for just yesterday I had heard his story from Mr. Ye, and was prepared to meet quite a different type from this energetic, young helper with the bright face and sweet boyish smile.

This seventeen year old boy came from a poor family. His sister kept a notorious home in the "red light" district. Probably she had been driven to this extremity by economic pressure, or for all I know, sold into the life of shame while a young child, as is so often the case. She invited her brother to come and live with her and to earn his board and keep by doing errands and helping about the place. From childhood he had seen nothing but the lowest, the basest in human beings; daily he heard only the sound of revelry, drunken debauch; with the flames of vice and passion he was well acquainted, while a perfect stranger to all holier, purifying influences. Jai Min had never seen the inside of a school: the vilest gambling dens, the tinsel and white-washed tomb of the "Yoshiwara" had been his only school-room. He certainly was one of those who had never had a chance in life, the wonder of it all is that there were any instincts of right left, or desire for purity possible in his heart.

As Jai Min was out one night on some errand for his sister he passed down Chongno,

and one of the men from the Hall invited into the room. The notes of a sweet old hymn were falling softly. "Some new place of entertainment"—thought the boy, who always had time to investigate a new pleasure. He went upstairs, found himself in a large room, one side already well filled with men, the other side with rows of women, sitting orderly on long benches, while a Korean man with the happiest face he had ever seen stood up in front and led the singing: "Whiter than snow, Yes, whiter than snow,—O, whiter than snow, and I shall be whiter than snow!"

This was something new under the sun, but very interesting to the boy! He looked about at the people: all were quiet. They listened eagerly to what the man was saying. The calm was noted, but how strangely seemed the place; the general atmosphere was of peace and good fellowship. After a while the men began to tell of what had happened to them,—to tell of what the Lord Jesus Christ had done for them in cleansing their hearts and making them pure,—and others spoke of a faith that this same Lord would keep them from sin if they but let Him have His way in their hearts. Jai Min was filled with astonishment; at the same time such a fear took hold of him that he trembled. He realized that there was something to strive for in the world besides vanity and vice, something worth while besides luxury and lascivious living. He saw that these men were different from anything he had ever known, different in desire and purpose. A new vision came to him that night, a vision of the pure and love of the Man of Galilee. He saw his own life, his sister's life and the life of the wretches who frequented her house, as they really were. He was overcome with conviction and shame, and his heart went out in

ew longing and unutterable desire for a clean heart. He, too, wanted to be different.

Jai Min knelt in a torment of pain, and prayed to the God of purity and peace for cleansing. With tears of real penitence he promised that he would never go back to the old life. "O, God save me and make me clean!" The prayer that listening angels send to hear! Surely there was joy in Heaven.

The boy went home and told his sister where he had been and what had happened. He told of his realization of the evil of the life they lived and that he had determined by God's help to stay a clean man. The sister, the notorious Sim Mai Hyung, seemed to have been touched and somewhat troubled, for she answered:—

"As for your words, they are wise and true. But a life such as mine can not be changed in an hour. You are right, however, and some time, little by little, I, too, will change my way of life."

"Until that time, then," said the lad, "I must leave you. I'll go back to my father's house and try to find an honest way to earn my living." Sad and helpless, the sister saw him leave her house,—but the promise of a new hope and new light was sown in her poor, darkened heart, too, that night.

Old man Sim was an ignorant and poor coolie, working at any odd jobs that he could find,—having a time to earn the little that was necessary to buy the scant food for the humble home. He, too, had known only the hard things, the ugly realities of life. Poor old man! In his ignorance he felt that he had done well by son and daughter. Did they not live in plenty, amid luxury and in the grandeur of a pleasure palace, while he toiled as a coolee, and then never had enough to eat and wear? So small wonder that this returned prodigal received no fatted calf or hearty welcome from the father on his return.

"All this strange talk is only some queer notion of that Jesus religion, brought here by the crazy foreigners! What is good enough

for us ought to be good enough for you, my son. Comfort, luxury all thrown away! I've no patience with your silly notions of hypocrisy,—a pure heart, huh!"

Only the rock-like purpose of the boy, and his anguish in telling his story, which somewhat frightened the old man, kept him from driving him away from home. But with sober second thought came the realization that this big husky fellow would be another worker, another bread winner, "rice-winner" rather, and he let Jai Min stay.

The Night Market on Chongno, one of the great sights of Seoul, is always open during the spring, summer, and fall months. Here Jai Min took a stall and, for a small commission, sold fruit for the big wholesale merchants. Very seldom he misses a service at the Kei Dong Chapel, though his work in the night market makes it impossible for him to attend the Hall, a real sacrifice. When the long, cold nights of winter come the night market is closed and Jai Min does any job of coolie work that he can find, rejoicing to have his evenings free for the Hall services.

Jai Min has led several of his old associates into the new life. A few months after her brother left her house, Sim Mai Hyung moved to Choong Chung Province. He took what money he could use, bought Testaments and leaflets and went to visit his sister, using the time in telling the story of Jesus to all who would listen.

Many months have passed since that night when the aimless boy from the crimson town first found his way into the Hall; who among us would have believed that the hard fellow, paralyzed by the basest of living, could have been so changed? Some Christian workers, even those of long experience, claim that a person so ignorant of spiritual values must be taught little by little, until they come to a realization of their own need of a Saviour and of the meaning of Divine love. Jai Min, however, is one of the many who have come to Jesus, finding pardon and peace the first time they heard the message, finding the truth of the promise: "Though your sins be as scarlet they shall be as white as snow."

The Childhood of A Second Generation Missionary

MRS. RUTH NOBLE APPENZELLER

I. When I was taken for a Spy

IT WAS DURING the Russo-Japanese war. Japanese troops had begun to pour into Pyengyang from Japan en route to Manchuria, and I can remember seeing them crossing the river by the hundreds. A notice had gone out to the effect that all Americans make and wear red, white and blue buttons. My mother and father wore them but didn't think, I suppose, that a child would need one.

In those days I rode back and forth to school on a donkey, led by our "out-side man." Since the city was walled and the school was beyond the wall I had to go through the city-gate. Returning home on this particular day I saw, to my surprise, that the gate was guarded by soldiers who were made ferocious looking by heavy fur caps.

As my donkey reached them they fixed bayonets to block my passage. A couple of soldiers came up to us and questioned our man, but not understanding Japanese he only grinned. They motioned for me to dismount, which I did; then one of them began to search my pockets. At this I grew very frightened and began to cry. When the soldiers saw the tears in my eyes, they became softened, and smiled, and ordered me back up on my donkey. They had decided I wasn't a Russian boy spy after all but just a harmless little girl.

After that experience I wore a red, white and blue ribbon around my hat and a little American flag in my button-hole, and whenever I rode by the Japanese soldiers they smiled.

II. When you discovered that there isn't any Santa Claus

You are six years old and it is Christmas time. You know everyone well in that room and your favorite grown-up is there. When Santa Claus comes jingling in, you look around

for your friend to share the thrill with him but you cannot find him. Then you notice something very familiar about Santa's voice and you are filled with a grave apprehension. After Santa has gone, your favorite grown-up comes back, but there is something hard about your throat and all the way home you feel heaviness in your heart. You don't say anything to anyone and when your parents claim, "Wasn't it fun seeing Santa Claus again?" you force a smile and say, "Oh, yes." You have learned your first lesson in the world of grown-ups.

III. When the others received the Prizes

You are eight years old and your own parents and those of all your little friends are gathered to witness the closing exercises at the school. There are prizes for perfect attendance and excellent work. Everyone gets your grade but you receives a prize. There is much clapping and rejoicing. You know that you don't deserve a prize and you are more envious or unhappy. You smile with the others, but when you come home, your father suddenly takes you in his arms and squeezes a yen bill into your hand, and says, "That's my prize to you for being good, dear heart." You thrill with surprise and pleasure and you somehow realize the great sympathy that your father felt for you at the school house. After years no prize or recognition ever gave you as much pleasure as that yen that your father gave you for just being good.

IV. When you go on your Travels

You are nine years old when you go with your father and his friend to a Japanese house over in Japan. You sit looking out over the falls, and pretty, kimonoed Japanese maids pile little cakes and tea in front of you. The cakes are very different from the fat molasses cookies at home and you eat many of them.

Your father is too busy talking to his friend to notice you, and the maid brings in another pile of cakes and yet another. Then it is time to go and you run on a few steps ahead. You hear a discussion and you look back to see your father taking money out of his wallet and giving it to the maid. You grow hot and cold all over. What, oh, what had you done? You had thought that the friendly ladies had given the cakes to you; your chagrin is too deep for

words. You walk along behind without any spring to your legs.

After a while you tell your father that you didn't know that he would have to pay for them and you say that you are sorry. He laughs and pats your head and says, "Why, that's all right, honey. That wasn't a home, but a tea-house. Don't you think any more about it." But it isn't all right and you learn another lesson in the world of grown-ups.

The Sunday School Bus

R. M. WILSON, M. D.

WE WISH TO SEND the following sketch to our good friends in America who are interested in Sunday School work which I feel to be one of the richest opportunities for the harvest of souls. No person responds to the Gospel so readily as the child.

For four years this, our Sunday School bus which was given by some friends, has run without missing a Sunday; and our faithful Mr. Chung who is seen at our right has missed only one Sunday during all that time, and that on an occasion when he and I both had to be away. He starts out about 8:30 with the first load and goes south on the beautiful highway dropping two teachers to each village, and turns around at a distance of about four miles. Returning to our compound he takes another load of usually 20 person and goes on the eastern highway for five miles. On this last trip he waits until the lessons have been taught and these teachers can ride back. But the first group must walk back, of course.

Our first teachers are trained for this work in the girls' school, and they not only carry the Gospel to these children in the out-of-the-way places, but this also gives them some experience in teaching and test their ability for practical work. For many years the individual missionaries have active part in this work, and usually the first assignment to a new missionary is one of these villages where he works through his native teach-

er at first and gradually learns the language and preaches himself.

We have 48 Sunday schools in and about this city, the most remote one being five miles. No one is paid for this work in any way, but the ride is very attractive to many of them, for rarely do they get an automobile ride except in this bus. We are much in need of a set of tires, but these have given us good service.

Mr. Chung has a suit case in which he keeps literature and Bibles and picture cards and tracts, and each teacher is given some to hand out to the children. The little Sunday-school picture cards mean a great deal to these children. On a good day the total attendance is around 3,000; on market day it drops off, for the parents must go to market, and the children must be with the babies. Sometimes almost every child that comes to Sunday school will have a baby tied on its back.

In one place when we first started the singing it disturbed all the village dogs and this helped to bring the crowd out. In that village we now have a fine Sunday school, a good day school and are almost ready to organize a church. Won't you pray for a blessing upon this work which is reaching thousands of people? We would recommend such a work for every Mission Station, for, where it is voluntary, the results are good. There are over a hundred villages, within a radius of five miles in this section, so there is much work yet to be done.

The Mitsui Dairy Farm

DOUGLAS B. AVISON, M.B., D.P.H.

IT WAS IN TOKYO during the sixth Congress of the Far Eastern Association of Tropical Medicine that one bright morning a large party of the doctors gathered in front of the Imperial Hotel, Tokyo, ready for the 40 mile drive to inspect the waterworks system of the capital city of Japan. It was a beautiful sunshiny day as we sped along the dry highways. Much of the scenery was really beautiful, and, aside from an occasional "pop" of somebody's tire which necessitated a slight change in the order of our formation, everything went well. After about an hour's drive we drew up before the gates of the Mitsui Dairy. It was but a stopping place in the course of our journey but it is of this that I wish to write.

Stepping from our cars we were each handed a printed pamphlet giving details concerning this dairy farm. We learned that it was the property of the great and wealthy Baron Mitsui for his own family use and that it was conducted as a model with the hope that where it led others might follow. So we walked on up to the gate, carefully wiped our feet on the cocoanut mats which were freely sprinkled with antiseptic powder, passed through and received a cordial welcome from those detailed to show us around.

Going along beautifully gravelled walks bordered with grass and flowers our guides pointed out to us a beautiful picture of Jersey cows peacefully grazing in the pasture. We finally arrived at the byre where the cattle sleep when they come in at night. It was indeed a model building, with an artificial

ventilating and heating system, plenty of windows each armed with doors of sliding glass shutters and wire screening, automatic draining cups for each stall and an automatic flushing which kept the trench behind the stalls clean at all times. To crown all there was a large but shallow cement pool outside through which every cow must walk so as to wash from her feet the dust or dirt which she might otherwise take to bed with her.

From this building we were taken to another where the cows assembled at milking time to be milked aseptically by men suitably prepared and attired for such a task. In the same building was another room where men, dressed up in white caps, clothes and aprons and wearing rubber gloves, pasteurized and bottled the milk and fixed on the metal caps which closed them as securely as beer bottles. Next we went to the maternity hospital where the cows gave birth to their little ones and stayed during the convalescent period. Right next was yet another building where those little ones were kept between feedings, where the bawlings might not disturb the much needed rest of their mothers. Finally we saw the daddy of them all lying serenely before the front door of his own home chewing his cud.

It was a never-to-be-forgotten day. If I had any doubts as to the wisdom of it all, they were dispelled when we were allowed to drink our fill of real milk and of tea from the Baron's own plantations in far off Formosa with real cream in it from the dairy we had just inspected.



Need of Public Health Instruction in Mission Schools

MISS C. M. ESTEB

HYGIENE, Public Health and Sanitation have been discussed for decades, and promise to occupy a place on the programs for some decades to come. But when one gets out into the interior, he is appalled at what he sees and we wonder what we as Missionaries are doing in order to help and promote higher standards of life and health. Are we doing all we can to educate these people along this line of work? It is true we cannot put a Public Health Station in every country village. It is true we cannot send Hygiene Instructors all over the country. Yet it is true that from almost every little country town there are children going to school. Is there a better place than the schools for the promotion of this great and useful work?

Only a short time ago, there was a child brought to a dispensary; ten days before he had put his hand into a pan of boiling oil and been badly burned. The home remedy was wet clay applied on the blistered hand. Of course, the result was a badly infected hand and sloughing fingers. On inquiry it was found that the father who brought the child to the dispensary was a graduate of a Mission School. Had he been taught First Aid, Hygiene and Sanitation in the school it might have been the means of saving his child's hand.

We find that almost all of our skin disease cases can be traced back to the absolute lack of so called health education in earlier life regarding hygienic living. This reminds one of the saying that the first fifteen years of the child's life make the child. If this be true, why not develop the pupils' mind along this line of study with their other studies?

Before I pass on to the discussion of the next point, I would like to say that, whereas facts seem to prove my last point, I am afraid that in relation to the next, I am in precisely the same position as the little boy who, asked

by his teacher to give three proofs that the world is round, replied: "Cause Father says so, and Mother says so, and you say so!" I cannot marshal cold facts to prove my contentions regarding the following points. I can only repeat what others, who have given this subject considerable thought, believe. If the graduates from our schools are to go back to their own homes and serve their own people, they must have those qualifications which will not only give them education along the lines of reading, writing, etc, but of a higher standard of living. This can only be brought about by teaching these country people how they can live in health and sanitation in a practical way. But if there is no such course in our schools, how can the graduates qualify to teach these subjects?

At present the Home Hygiene and Sanitation course is given in seventeen of the thirty-five public high schools of greater New York. The course is given in all the high schools for girls, and in all the co-educational high schools where space and kindred circumstances permit. During the semester, February-June, 1927, three thousand high school girls in New York City took this course. The work is variously placed in the curriculum. Some principals have placed it early, on the theory that all of the many less favored students who leave school after one year should possess this useful knowledge. Others feel that older pupils have a better appreciation of health standards, and thus have placed it nearer graduation. The time allotted is a period of forty-five minutes twice a week for a semester, making a total of thirty-eight periods for the course.

The course includes lectures and demonstrations, on home and community hygiene, personal hygiene, school hygiene, industrial hygiene, sewage disposal, water and food supply, flies and vermin, ventilation, first aid. If these

courses are considered of such importance in lands where health and hygiene have been taught from infancy up to manhood, how much more important are they in a land where they know absolutely nothing on the

subject? Having such a course in schools would not only be a great benefit to humanity, but might open up new channels for missionary work.

Notes and Personals

Northern Presbyterian Mission

Birth

To Rev. and Mrs. L. P. Henderson a son, Lawrence Putnam, on April 18th at Hinking, Manchuria.

Death

Rev. A. G. Welbon, of Andong, on April 5th at Seoul.

Left on furlough

Dr. and Mrs. A. G. Fletcher and family, of Taiku.

Birth

To Rev. and Mrs. S. Lautenschlager, a daughter, Kathleen May March 12.

Resignation

Miss J. M. Rehrer of Kangkei.

Southern Presbyterian Mission

Birth

To Rev. and Mrs. E. T. Boyer, Chungju, a daughter, Katherine, on March 26.

Death

Miss Gertrude Chapman, aunt of Miss Georgia Hewson, Mokpo, on March 24.

Resignation

Rev. S. K. Dodson, of Kwangju, now of Hillsville, Va.

Australian Presbyterian Mission

Left on furlough

Miss F. L. Clerke, of Chinju.

Northern Methodist Mission (W. F. M. S.)

New Arrival

Miss A. Evelyn Leadbeater, M. D., to Pyengyang.
Dr. and Mrs. N. Found, to Severance Hospital, Seoul.

Birth

To Dr. and Mrs. N. Found, of Seoul, a daughter, Eleanor Grace, on April 9th.

Southern Methodist Mission

Returned from furlough

Prof. J. E. Fisher, Ph. D., and wife, Seoul.

Colporteur Kim's Contemplation

In the winter Bible Conference Colporteur Kim was speaking of our need of the Holy Spirit :

"It is impossible for us to mend our ways without the Holy Spirit. Right here in this town I knew a gambler who lost all he had and, to break himself of the entrancing habit, he cut off the thumb with which he drew out the cards. With his hand bandaged up he hung around the gambling rooms, watching the players. By the time he had the wrappings off he was sitting among his old friends drawing out the cards with his first and second fingers."

"When the Spirit is in a man's heart the Evil One opens the heart's door a little crack, peeps in, sees the Holy Spirit there and runs away full speed."

Referring to the Korean method of baiting tiger traps with the bodies of dead dogs, Pak quoted the following old saying: "A fish dies from coveting a worm, a tiger from coveting a dead dog and a man from coveting money." F. S. MILLER.

"Open Secrets of the Kingdom of Heaven"

Many in Korea will recall Dr. Frank Schofield and his wonderful influence upon the young men of Korea. His father has recently published a book with the above title which is proving a blessing to many. Professor J. M. Shaw, of the U. C. C. College, Hae-fax, N. S. says:—"I have read this book and found it stimulating and suggestive. Especially would I single out the study on "The Open Secret of the Cross" with its emphasis on the difference between facts or testimony and theory. The book was worth publishing for this chapter alone."

This book can be obtained from the C. L. S., Seoul. Price ₩ 1.45.

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New York Quinine & Chemical Co.	Quinine in Capsules
Pacific Coast Biscuit Co.	Sodas & Fancy Cakes
Everybody's Brand	Macaroni & Spaghetti
Thompson's	Candy Bars
Beechnut Packing Co.	Chewing Gum & Mints
C. E. Jamieson Co.	Toilet Preparations
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